

Fill	in this information to identify you	ır case:										
	otor 1 Christine											
	otor 2 ouse, if filing)				_							
Uni	ted States Bankruptcy Court for	the: EASTERN DISTRICT	OF PENNSYLVANIA	A								
Cas	se number 20-11360					Chec	k if this is	:				
(If kr	nown)		_				ın amende	ed filina				
						」 □ A	supplem	ent showin	ng postpetition ollowing date:			
0	fficial Form 106l					- N	/M / DD/ \	/YYY				
S	chedule I: Your In	come					, 22, .			12/15		
atta	use. If you are separated and you are separated to this for the determinant of the determ	m. On the top of any addit	ional pages, write yo				umber (if	known). <i>A</i>	Answer every			
	information.		Debtor 1	Debtor 1				Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Employed ☐ Not employed					
	employers.	Occupation	Administrative	Asst								
	Include part-time, seasonal, or self-employed work.	Employer's name	Vanguard									
	Occupation may include stude or homemaker, if it applies.	nt Employer's address	Malvern, PA 19									
		How long employed t	there? 2 years	3			_					
Par	t 2: Give Details About	Monthly Income										
	mate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. In	clude your noi	n-filing		
	u or your non-filing spouse have e space, attach a separate shee		ombine the informatio	on for all e	empl	oyers for	that perso	on on the li	ines below. If	you need		
						For Del	btor 1		btor 2 or ing spouse			
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	5	,925.83	\$	N/A			
3.	Estimate and list monthly ov	ertime pay.		3.	+\$		0.00	+\$	N/A			
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	5,9	25.83	\$	N/A			

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Debtor 1		Christine A. Deery			Case number (if known)			20-11360				
					For	Debtor 1			ebtor	2 or		
	Cop	y line 4 here	4.		\$	5,925.8	3	\$	illing 3	N/A		
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	1,087.6	7	\$		N/A		
	5b.	Mandatory contributions for retirement plans	5k		\$_	591.5		\$		N/A	-	
	5c.	Voluntary contributions for retirement plans	50		\$	0.0	_	\$		N/A	_	
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.0	_	\$		N/A	-	
	5e.	Insurance	56	Э.	\$	465.8		\$		N/A	-	
	5f.	Domestic support obligations	5f		\$	0.0	0	\$		N/A	-	
	5g.	Union dues	50		\$	0.0	0	\$		N/A	_	
	5h.	Other deductions. Specify:	5h	า.+	\$	0.0	0	+ \$		N/A	_	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,145.0	0	\$		N/A	-	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,780.8	3_	\$		N/A	-	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			•				
	O.L.	monthly net income.	88		\$	0.0		\$		N/A	_	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8k	J.	· <u>—</u>	0.0	<u>U</u>	·		N/A	-	
		settlement, and property settlement.	80		\$	0.0	_	\$		N/A	_	
	8d.	Unemployment compensation	80		\$	0.0	_	\$		N/A	_	
	8e.	Social Security	86	Э.	\$	0.0	U	\$		N/A	=	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Unemployment Pension or retirement income	e 8f 8g		\$	1,600.0 0.0		\$ 		N/A N/A	-	
	8h.	Other monthly income. Specify: Tax Refund		ง. า.+	<u>\$</u> —	700.0	_	+ \$		N/A	-	
		Tux Roland		Г		1 00.0	_	_			-	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	2,300.0	0	\$		N/A	A	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	•	6,080.83 +	\$		N/A	= \$	6,080.83	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_		3,000.03			17/7		0,000.00	
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify:	dep						hedule		0.00	
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	6,080.83	
12	Do.	you expect an increase or decrease within the year after you file this form	2						ι	Combir monthl	ned y income	
13.		No. Vas Evolain:										

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